



# *Substance Abuse* **Services in Wisconsin**

## **1998 Annual Report**

**Department of Health and Family Services**  
**Division of Supportive Living**  
**Bureau of Substance Abuse Services**  
**July 1999**

# Major Accomplishments - 1998

- Four **State Treatment Needs Assessment Study** reports were completed following the three-year data collection effort. They are the *Substance Abuse and Need for Treatment Among Arrestees in Wisconsin*, *Substance Abuse and Treatment Needs Among Pregnant Women in Wisconsin*, *Composite Indicators*, and *Treatment Capacity Studies*. The information will be used to plan for future initiatives.
- Administrative Rule HFS 75, **Substance Abuse Services Standards**, completed Department review and was submitted to the Legislative Council. Public hearings were held in May of 1999.
- **Emphasis on Special Populations in 1998.** (1) The Bureau of Substance Abuse Services and the Bureau of Community Mental Health continued to co-sponsor clinical co-occurring workshops and held four over this last year, (2) Bureau of Substance Abuse Services (BSAS), Bureau of Community Mental Health (BCMH), and the Division of Health Care Financing worked on the development of managed care pilot programs. (3) BSAS, BCMH and the Bureau on Aging and Long Term Care Resources developed training for the co-existing issues of substance abuse, mental health and the aging population.
- **Women's Programming** was enhanced and expanded through collaboration with the Wisconsin Women's Empowerment Network (WWEN) through development of the Wisconsin Women's Coalition on Substance Abuse, expansion of the Women's Resource Desk Project through a successful Center for Substance Abuse Treatment (CSAT) application grant. BSAS collaborated with the Division of Public Health's Maternal and Child Program, the UW's Family Empowerment Network (FEN) and others to deliver two training events on Perinatal Substance Abuse.
- **County Quality Improvement Reviews.** Five county quality improvement reviews were completed, identifying technical assistance needs and showcasing counties with exemplary delivery systems. These reviews provide an avenue for state and county partnerships for service improvement.
- A team under contract with CSAT performed a **federal state alcohol and other drug technical review** in Madison and a state-requested review conducted in Milwaukee to assess efforts to develop formal linkages between substance abuse and other services. Both reviews resulted in positive feedback to the Bureau.
- **Treatment Works.** For the first time, several Wisconsin treatment centers published studies of recovery rates after discharge, indicating that treatment works in Wisconsin.
- **State Council on Alcohol and Other Drug Abuse** approved its 1998-2001 Four Year Strategic Plan in compliance with statutory requirements.
- The substance abuse field was alerted to **Emergency Rule HFS 12 and HFS 13, Caregiver Background Checks**, which would bar caregivers with certain criminal convictions and abuse findings from working with clients. Through testimony and information given to the Department by the field, modifications were made prior to rule enactment.
- The Bureau of Substance Abuse Services and the Foundation for Addiction Research and Education sponsored its **9<sup>th</sup> Annual Addictions Research Conference** to infuse the findings of Wisconsin conducted addictions research into clinical practice.

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# Introduction

## Statement of the Problem

Alcohol and other drug abuse (substance abuse) is a significant health, social, public safety and economic problem. Each year in Wisconsin, there are over 800 deaths, 10,000 traffic crashes resulting in 8,000 injuries and over 90,000 arrests all attributable to alcohol and other drug abuse. Thirty-two percent of offenders booked into jail and nearly 65 percent of prison admittees have substance abuse problems. Alcohol and drug abuse is the fourth leading cause of death in Wisconsin behind heart disease, cancer, and stroke, and it is the fourth leading cause for hospitalization behind mental illness, heart disease, and cancer. For males age 15 to 44, substance abuse is the most prevalent reason for hospitalization.<sup>1</sup> Public opinion backs the seriousness of the problem as documented in a 1979 landmark Department survey of 6,000 Wisconsin adult residents. Alcoholism, crime, drug abuse, and juvenile delinquency, in that order, were identified as the top four problems facing Wisconsin. The economic impact in Wisconsin attributed to substance abuse is estimated each year to be well over 2.6 billion dollars.<sup>2</sup> Despite the magnitude of the problem, studies conclude that each dollar invested for substance abuse services yields a return of seven dollars.<sup>3</sup>

## Federal Authority

The Department of Health and Family Services (DHFS) has been designated by the Governor to administer federal Substance Abuse Prevention/Treatment (SAPT) Block Grant funds, and the Department designated the Division of Supportive Living (DSL) as the state agency responsible for administration of the block grant program. DHFS is also responsible for administration of state/county community aids for substance abuse and manages various state legislative mandates related to substance abuse. During 1998, the Division of Supportive Living's Bureau of Substance Abuse Services (BSAS) served as the focal point for the day-to-day administrative, management, planning, program, fiscal, and coordination responsibilities for substance abuse programs.

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<sup>1</sup> From 1979, 1988, and 1996 reports prepared by the Wisconsin Bureau of Health Information.

<sup>2</sup> 1985, Alcohol, Drug Abuse and Mental Health Administration.

<sup>3</sup> 1994, State of California Department of Alcohol and Drug Programs study.

# Programs and Funding

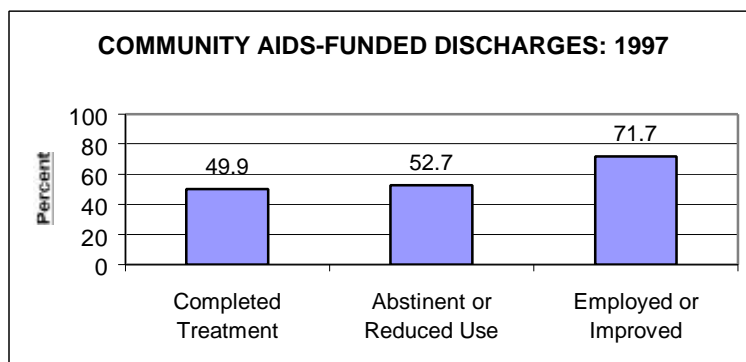
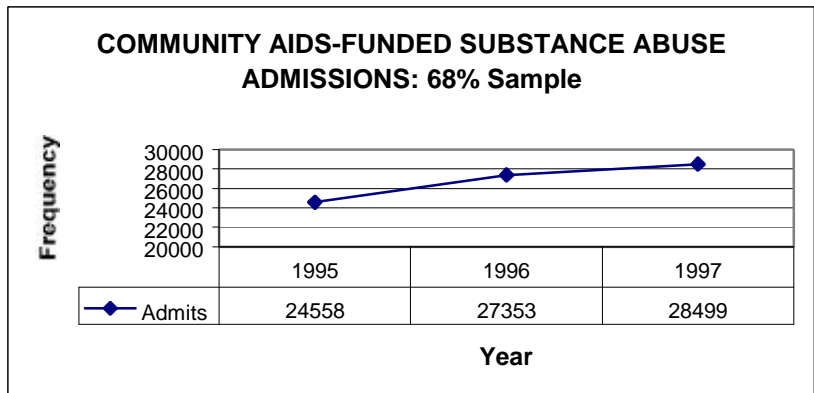
The following chart illustrates overall substance abuse funding through the Department of Health and Family Services for State Fiscal Year 1997-98 and includes state general program revenue, program revenue and federal funding sources.

<b>PROGRAM NAME</b>	<b>1997-1998 Funding Levels</b>
Community Aids .....	\$43,076,900
Injection Drug Use Outreach, Intervention, Treatment & Prevention .....	2,383,600
Neighborhood Drug Use and Violence Prevention Program .....	1,200,000
Juvenile Justice Pilots .....	1,340,000
Treatment Alternatives Program .....	937,600
In-Home & Community-Based Treatment for Minorities.....	200,000
Services to Persons in Treatment .....	250,000
WI Alcoholism & Drug Counselor Certification Board .....	121,500
Women Reaching Women .....	60,000
SA Program for Women .....	235,000
Minority SA Counselor Training .....	283,000
Adolescent SA Treatment Center .....	50,000
Community Education Program.....	125,000
Multi-Disciplinary Prevention & Treatment for Cocaine Families .....	800,000
Capacity Building for Treatment Programs .....	305,000
Community SA Primary Prevention Program.....	500,000
Synar Compliance .....	74,000
HIV Prevention and Case Management.....	149,000
High-Risk Youth Inner-City Project.....	428,600
Family Preservation and Prevention Resources .....	966,800
Wisconsin Regional Teen Institutes .....	200,000
Law Enforcement Partnership.....	193,600
Milwaukee Family.....	40,000
Network Training and Media.....	64,200
CSAT Needs Assessment .....	320,200
Substance Abuse Services Information System .....	31,600
Medical Assistance.....	8,980,500
Training for SA Workers.....	25,000
Treatment for Deaf and Hard of Hearing Persons .....	125,000
Counselor Coordinator .....	68,600
Funding Development Specialist Position .....	60,100
Staff Salary Match (Bureau Director and Project Director) .....	113,300
Alliance for a Drug-Free Wisconsin.....	253,000
High Risk Youth Tribal Prevention.....	409,800
Native American SA Education & Treatment Programs .....	500,000
Native American Parenting Education & In-Home Counseling.....	200,000
Services for Hispanic Persons.....	248,200
Healthy Beginnings .....	87,500
Career Youth Development Center .....	110,000
Prisoner Reintegration Program .....	125,000
Group Home Loans .....	100,000
Intoxicated Driver Program .....	1,150,000
Community Options Program .....	245,600
Gemini Program.....	997,300
Anchorage Program.....	937,500
Wisconsin Clearinghouse .....	97,900
DHFS SA Staff Support Costs .....	<u>1,289,900</u>
<b>TOTAL</b>	<b>\$70,457,900</b>

## Community Aids

Community aids are state and federal funds that are distributed by the Department to counties on a calendar year basis to support community mental health, developmental disabilities, substance abuse, and social services for the uninsured and underinsured. The majority of community aids funds are

allocated to counties through the basic county allocation, which is a population-based formula matched by county/local property tax funds. Within the limits of these available state, federal and county funds, counties must provide the following services: Collaborative and cooperative prevention services; diagnostic, evaluation and assessment services; emergency, inpatient, residential, partial hospitalization, and outpatient services; research and staff training; and continuous planning, development, and evaluation of programs.



In 1997, counties reported expending \$63,175,652 in community aids for 58,646 AODA clients. The Bureau of Substance Abuse Services, in cooperation with the Division of Supportive Living's Information Systems Section, maintains a substance abuse services data set that contains a sample of about 68 percent of clients served under

community aids funds. (68 percent sample means that the data covers 68 percent of the clients treated. Omitted are Milwaukee, Dane, Walworth and Wood counties, see page 7.)

## Substance Abuse Prevention and Treatment Block Grant

One federal source of funds under community aids is the SAPT Block Grant. The federal Substance Abuse and Mental Health Services Administration granted the Department \$23,362,600 for state fiscal year 1998. Of this amount, (a) \$11,318,700 was distributed to counties through community aids; (b) \$9,111,200 was provided to counties, tribes or other community based organizations for substance abuse programs; and (c) \$1,649,200 was transferred to the Department of Corrections to provide substance abuse services to correctional populations. Counties are required to minimally target 35 percent of the funds for individuals with alcohol abuse, 35 percent for drug abuse, 20 percent for prevention, and 10 percent for pregnant women and women with dependent children.

# State Council on Alcohol and Other Drug Abuse

The Office of the Governor created the State Council on Alcohol and Other Drug Abuse (SCAODA) in 1970 to provide leadership and coordination regarding alcohol and other drug abuse (AODA) issues confronting the state.

The Council continues to provide leadership, both at the state and national level, in advancing policies that seek to abate the negative effects of alcohol and drug abuse as well as opposing ineffective policies. The Bureau of Substance Abuse Services provides staffing support to the Council. Four full-Council meetings, one public hearing, and numerous subcommittee meetings were held during 1998. During that time, the Council addressed no fewer than 20 major substance abuse issues facing the people and institutions of Wisconsin and the nation. The following is a list of top issues and the corresponding results.

1. The Council approved its 1998-2001 Four Year Strategic Plan in compliance with statutory requirements. Each of the Committees completed a work plan for the first year of the four-year plan as well. The Planning and Funding Committee held a public forum in La Crosse on November 16, 1998, as part of the statewide meeting sponsored by the Bureau of Substance Abuse Services. The forum was designed to afford interested citizens the opportunity to comment on the state plan as well as highlight priorities for Council review. The forum was attended by 46 individuals.
2. In addition, the Intervention and Treatment Committee requested and received Governor Thompson's support in proclaiming September 1998 as Employee Assistance Month in Wisconsin. The proclamation received attention at the state and national level among employee assistance professionals.
3. The State Council also continued to provide legislative tracking services for individuals and agencies to monitor pending legislation addressing alcohol and other drug abuse. The monitoring process is maintained on an Internet web site managed by the University of Wisconsin Clearinghouse for Prevention Resources at <http://www.uhs.wisc.edu/wch/leg-upd.htm>. Additional information about the history and goals of the Council is available on the BSAS web site at <http://www.dhfs.state.wi.us/substabuse/index.htm>.
4. During 1998, the Council also assisted legislators in drafting a bill addressing the availability of nitrous oxide in the state. Nitrous oxide had been available throughout the state as a food additive but was also linked to misuse as an inhalant. The legislation defined the process by which individual citizens are able to purchase nitrous oxide for non-medical and non-commercial use. Assembly Bill 215 passed both houses of the Legislature in the spring and was enacted on July 1, 1998.
5. Along with several other states, the Council analyzed and opposed the federal modification of the Substance Abuse Prevention and Treatment Block Grant formula's wage measure that would have reduced Wisconsin's Block Grant by \$2.3 million. As a result, the federal government announced they would hold all states harmless and conduct further inquiries about the appropriateness of the change in the formula.
6. In a more proactive mode, the Council has analyzed policies and carried motions to remove financial barriers to appropriate treatment. The Council has recommended to the Legislature that internal limits (caps) on the use of insurance funds for inpatient and outpatient services be removed and that deductibles be eliminated.

7. The Council was the impetus and ardent supporter of a proposal to institute coverage for residential treatment under the Wisconsin Medicaid program. The proposal would allow Medicaid to cover residential treatment in counties that agree to pay the non-federal portion of the treatment costs. At the time of writing, the item is still in the 1999-2001 Budget Bill. This policy will result in more appropriate and more cost-effective services for persons needing 24-hour-a-day care.
8. Senate Bill 385 sought to grant judges the power to order specific driver safety plan programs for intoxicated drivers without the driver first receiving an assessment from a qualified alcohol and other drug abuse professional. The Council analyzed and strenuously opposed this measure, and the bill was defeated.
9. Ensuring that persons with substance abuse problems are afforded the best chance of recovery is the goal of the Wisconsin Uniform Placement Criteria (WI-UPC). Based on the combined clinical experience of over 100 Wisconsin substance abuse professionals, WI-UPC sets rules for the admission, discharge, and continued care of clients in detox, inpatient, residential, day treatment, and outpatient services. The Council's support for the inclusion of WI-UPC in the administrative rules that govern certified treatment programs (proposed HFS 75) is critical to the success of WI-UPC.
10. The medical use of marijuana has captured national attention. The Council has voiced opposition to the medical use of marijuana but at the same time desires that further study and inquiry be made about its positive and negative effects.

The membership of the State Council on Alcohol and Other Drug Abuse [s.14.017 (2) WI Stats] consists of 22 statutory members, seven ad hoc members and five standing committees (Planning and Funding, Interdepartmental Coordinating, Diversity, Intervention and Treatment, Prevention). The membership of the State Council follows:

### **Membership, State Council on Alcohol & Other Drug Abuse**

The Governor	Member, Governor's Law Enforcement & Crime Commission
State Senator (majority party)	Representative, A direct provider of services to alcoholics and other drug abusers
State Senator (minority party)	Six citizen members, one of whom is a consumer representative.
State Representative (majority party)	<b>Ad hoc members added by the Council include representatives of:</b>
State Representative (minority party)	Alliance for a Drug-Free Wisconsin
The Attorney General	Department of Revenue
The State Superintendent of Public Instruction	Department of Veterans Affairs
The Secretary of Health and Family Services	Wisconsin Technical College System
The Commissioner of Insurance	University of Wisconsin System
The Secretary of Corrections	Office of Justice Assistance
The Secretary of Transportation	Department of Workforce Development
Chairperson of the Pharmacy Examining Board	
Representative, Controlled Substances Board	
Member, Wis. Co. Human Service Assoc., Inc.	



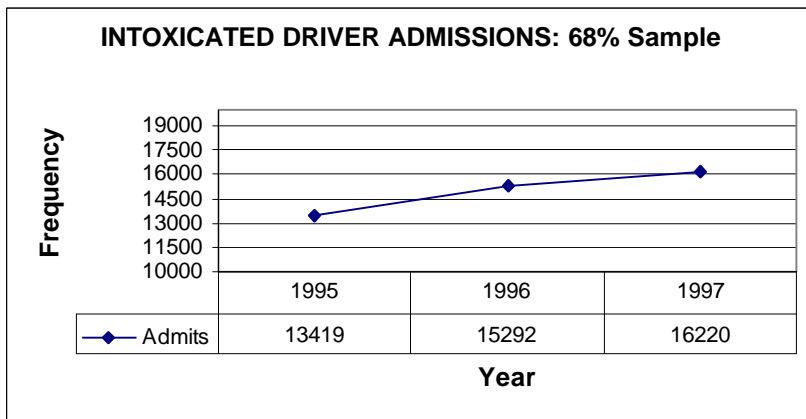
# Treatment Works

For the first time, several Wisconsin treatment centers published studies of post-discharge recovery rates, indicating that treatment works in Wisconsin. While there are several hundred treatment centers in Wisconsin, four of them published the results of post-discharge outcomes among their client populations during 1998. Financed with seed funds from the Bureau of Substance Abuse Services, they are the Jackie Nitschke Center, Green Bay; Directions Counseling Center, Watertown; Winnebago County Department of Community Programs, Oshkosh; and the Lawrence Center, Waukesha. The composite results of the surveys taken at six months post-discharge found the following:

- 86% of clients were satisfied with the services they received
- 60% were abstinent from alcohol and drugs
- 71% were employed
- 57% were attending support group meetings
- 89% had no further contact with the criminal justice system

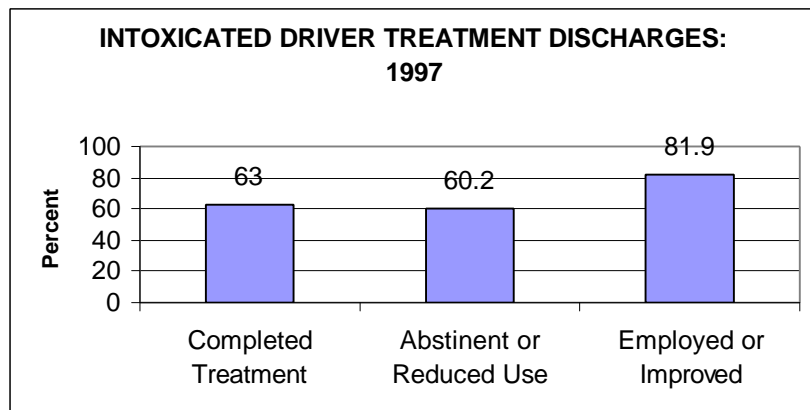
## Intoxicated Driver Program

The two charts in this section present 1997 admission and outcome trends for a 68 percent sample of intoxicated drivers receiving publicly supported treatment.



Established in 1982 to abate the growing intoxicated driving problem, this program enacted a driver improvement surcharge assessed against every convicted intoxicated driver. County treasurers retain 62.4 percent of the current \$340 surcharge to help provide services for intoxicated drivers assessed as in need of

treatment. In 1997, 37,136 persons were provided assessment or treatment services under this program. The Department is allocated \$1,150,000 from this fund each year for emergency grants to counties that need the revenue to cover treatment costs that exceeded available surcharge funds. In 1998, 21 counties received \$1,016,056.



# Injection Drug Use Street Outreach Program

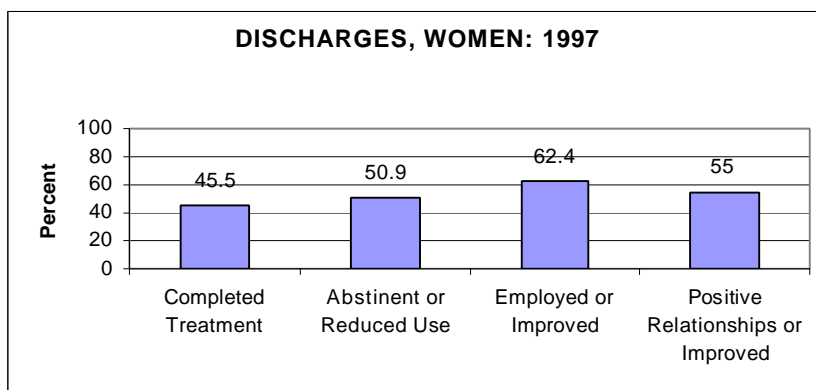
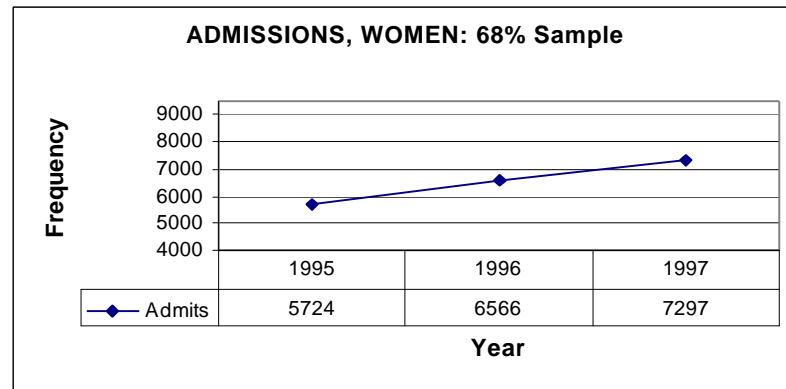
The purpose of intervention programs such as the street outreach workers is to identify drug users and help them stop using drugs. The primary focus is to actively seek Injection Drug Users (IDUs) not in treatment, provide information on needle-sharing and sexual transmission of HIV disease, and provide assistance by referring clients to available services. Using data from the targeted counties (listed in table at right), 385 clients received services through federal IDU funds.

**IDU Need in Targeted Counties**

<b>County</b>	<b># Injection Drug Users</b>
Milwaukee	4,337
Dane	1,454
Waukesha	1,260
Brown	788
Racine	778
Rock	627
Kenosha	553
LaCrosse	409
Walworth	321
Eau Claire	354
Total	10,881
Total # Statewide	21,144
Percentage in Targeted Counties	51.46%

**NOTE:** The client data reflected in the charts appearing in the following sections in this report (unless otherwise noted), are based on data collected from counties by the Human Services Reporting System (HSRS) for 1997. Milwaukee, Dane, Wood and Walworth do not currently report client data into the HSRS system, and, therefore, the data represents a 68 percent statewide sample of publicly supported clients receiving treatment. In particular, most of the special projects serving women are located in Milwaukee and Madison. These counties are expected to begin reporting in 1999.

# Substance Abuse Programming for Women, Pregnant Women and Women with Dependent Children



## ▪ Wisconsin Women's Empowerment Network, Madison, Wisconsin

**Wisconsin Women's Coalition on Substance Abuse.** The Wisconsin Women's Empowerment Network (WWEN), developed the *Wisconsin Women's Coalition on Substance Abuse*, to provide a forum to plan strategies for improving policies and reducing stigmas for women and addiction. The group meets quarterly and has grown from 12 original members to over 60 members. Several disciplines are represented in the Coalition, including women's treatment, public health, University of Wisconsin-Madison School of Nursing, domestic violence, disabilities, mental health, and maternal and child health.

**The WWEN Connection,** the newsletter of the Wisconsin Women's Empowerment Network project, began early in 1998 with an initial mailing list of 100 and ended the year with over 200 subscribers.

**Women and Substance Abuse: Understanding the Problem.** One hundred additional training manuals and 50 sets of videos developed in 1995 were distributed to professionals around the state in 1998. WWEN will modify and update this training tool in 1999.

**7<sup>th</sup> Annual Conference on Women and Substance Abuse.** The WWEN project held a one-day women's conference in Wausau, featuring a nationally known speaker from the Betty Ford Institute in California. There was a statewide attendance of 140 individuals.

**STAR Project** (Sharing Treatment and Recovery for women). In 1998, the WWEN project applied for and received a major federal Center for Substance Abuse Treatment (CSAT) grant to develop grass roots organizations around the state to reduce stigma and improve availability of treatment services for women. The total grant awarded was \$700,000 over a three-year period.

- **ARC Community Services, Inc., Madison, Wisconsin**

ARC is a private, not-for-profit agency with over 20 years of experience in providing services in the community specializing in the unique needs of the adult female offender and substance abusers and their children. ARC specializes in residential, day treatment, and outpatient services to women who are at risk for criminal activity and/or substance abuse. ARC Community Services, Inc., administers seven projects.

The Bureau selected ARC as one of the site visit locations for the federal technical review performed by the Center for Substance Abuse Services. ARC has presented their program at several conferences and educational workshops during the year, such as U.W. Extension and the "Children at Risk Conference."

During 1998, ARC's program manager received AODA Supervision Certification, an intake specialist was hired, and their Child/Family Therapist passed the Registered Alcohol and Drug Council examination.

- **S.A.F.E. Group Services, Milwaukee, Wisconsin**

S.A.F.E. provides treatment for cocaine families. The "Treatment Options for Substance Abusing Women Entering Recovery" (TOSAWER) program is designed to meet the needs of cocaine-addicted mothers and mothers-to-be and their children through the provision of case management and services that directly confront addiction.

In 1998, the total number of referrals was 98, bringing their total clients to 110. These clients included 10 pregnant women, 40 court-ordered women, and 88 who had custody of their children. Thirty-nine women were discharged in 1998, and the program achieved a completion rate of 64.5 percent (80 new admissions and 30 previous admissions to total 110) with 71 clients completing the program.

S.A.F.E. Group Services acquired additional property suitable for residential care, and they are exploring additional residential care for women and their children. S.A.F.E. developed a parenting and nurturing curriculum that they were able to offer to W-2 agencies. Eight cocaine-free babies were delivered. S.A.F.E. developed a computer lab for clients who are participating in W-2 with donations from the Department of Health and Family Services and a local community group.

- **Projecto Renacimiento, United Community Center (UCC), Milwaukee, Wisconsin**

Projecto Renacimiento project (rebirth) provides services to mothers of small children and pregnant women who are chemically dependent, with a special focus on cocaine-abusing women. The services are provided with a multi-disciplinary approach to accomplish its goals. The target group includes low-income Hispanic women residents of Milwaukee County. Services include case management, detoxification, inpatient treatment, residential treatment home-based services, day treatment, outpatient treatment, AODA education, child care and transportation.

- **Milwaukee Women's Center, Milwaukee, Wisconsin**

The Milwaukee Women's Center provides treatment of cocaine families. The Positive Options for Women Entering Recovery (POWER) program is a multi-disciplinary, case management and treatment model with a primary target population of mothers and pregnant women who have a current or recent history of cocaine abuse and/or other drugs or alcohol addiction. Annually, the POWER program provides case management services to a minimum of 30 primary clients and their children (together a total of 120) to promote healthy, drug free women who will be better able to care for their own health and that of their born and unborn children.

- **Our Home Foundation/Meta House, Milwaukee, Wisconsin**

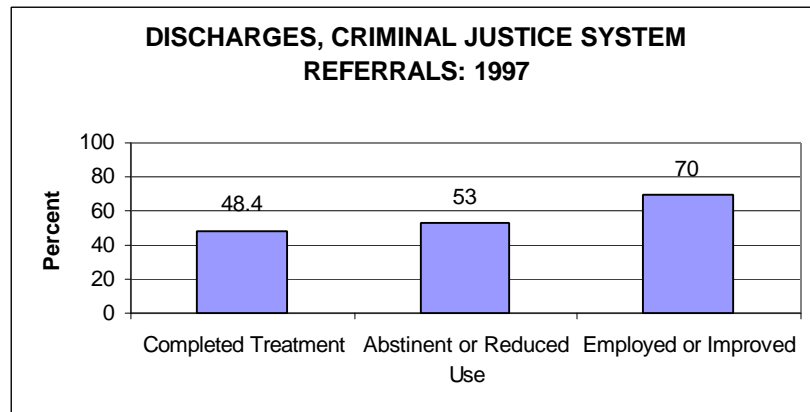
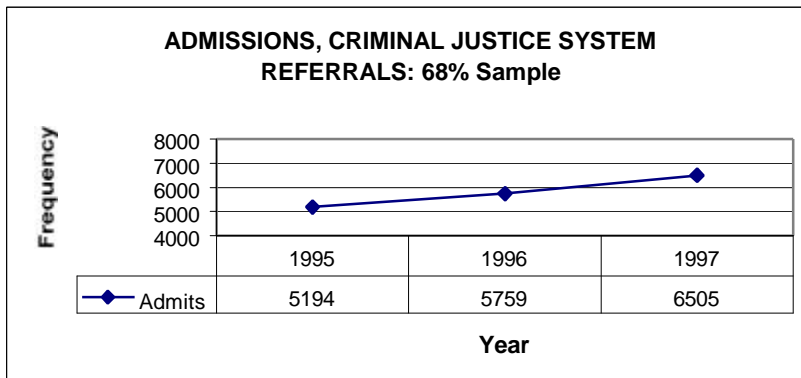
Meta House, through five programs, provides a target population of women with substance abuse a variety of services and opportunities that will reduce the incidence of alcohol and drug abuse, enhance their ability to function as self-confident, productive members of society, and reduce the incidence and severity of impairment in children affected by maternal substance abuse. The program goals are accomplished through a variety of residential treatment programs and a day care center designed specifically to deal with the gender-specific issues women face in the treatment of substance abuse.

In September 1998, the Bureau of Substance Abuse Services, working in collaboration with Meta House, received a three-year grant from the federal Center for Substance Abuse Services to expand the alcohol and drug abuse treatment capacity in Milwaukee. The grant, which will total \$2,250,000 over a three year period, is designed to provide substance abuse treatment services to women and families currently involved in the Wisconsin Works (W-2) program and child welfare programs in Milwaukee County. The grant places strong emphasis upon employment, family unification and reunification. Utilizing this additional funding, Meta House will expand its outpatient and day treatment substance abuse capacity.

- **Child Care Services for Parents in Treatment**

1987 Act 339 established grants for the provision of child care services for low income or single parents in treatment for the purpose of removing the barrier of child care that was preventing many parents from seeking treatment. Data from a 1989 Department-conducted evaluation of the program demonstrated that 85 percent of the parents in treatment showed improvement in their substance abuse problems. Services provided under this program include licensed in-home day care, licensed child care center, foster care, and group home care. Eight counties currently receive funding under this program, serving about 120 children each year and allowing 60 parents to seek and receive treatment.

# Criminal Justice Populations



## ■ Treatment Alternative Program (TAP)

In 1987, Governor Thompson signed into law Act 339, which created TAP after a Governor's SCAODA Work Group on Drugs and Crime recommended an alternative to incarceration for certain substance-abusing offenders. TAP was modeled after the nationally successful Treatment Alternatives to Street Crime (TASC) Program. TAP's goal is to break the substance abusing offender's drug/crime cycle through the use of an intensive case management/treatment model and systems collaboration which "bridges" the gap between the criminal justice and alcohol and drug treatment systems.

TAP presently operates in the counties of Dane, Rock and Eau Claire. There are 132 slots for the program that averages six to nine months in length. The three TAP programs are required to submit quarterly reports of their project in achieving stated objectives.

In 1993, the University of Wisconsin - Madison Center for Health Policy and Program Evaluation (CHPPE) conducted a three year independent evaluation of TAP. CHPPE studied overall recidivism over an 18-month period. Results indicated that there was a reduction in recidivism of 42 percent for those completing TAP compared to those not completing TAP. For those individuals entering TAP with a primary charge of repeat operating a motor vehicle while intoxicated (OWI), there was a 66 percent reduction in recidivism for those completing the program compared to those not completing the program.

CHPPE also reported that TAP appeared to be a cost-effective program in terms of reductions in the resource costs from the criminal justice system. CHPPE found that for every dollar spent on TAP, \$3.30 was saved in other parts of the criminal justice system.

During 1998, the three TAP programs served 584 criminal offenders with substance abuse problems. On the average, 105 costly jail days were averted per offender through participation in the TAP program. Eighty-nine percent of offenders had drug free urine screens during TAP enrollment. Forty-six percent of those discharged successfully completed the recommended treatment.

TAP's collaborative systems model was the framework around which Dane County submitted a successful application to the U.S. Department of Justice Drug Treatment Court Implementation Program and received a \$400,000 grant award. This program was implemented in 1998.

#### ▪ **CSAT Technical Assistance**

In 1998, BSAS continued to provide technical assistance based on the recommendations of the 1994 technical review of Wisconsin's criminal justice (CJ) system and AODA treatment. The following technical assistance was completed in 1998:

- A Criminal Justice and AODA Systems Collaboration Training was completed in June. The training brought together comprehensive county/state teams of CJ/AODA personnel from five counties for the purpose of promoting coordinated and collaborative systems response to the provision of AODA treatment to county residents in the criminal justice system.
- A Program Review and System Redesign of Wisconsin Division of Juvenile Corrections' AODA Treatment in Wisconsin provided in depth staff training at two male juvenile facilities on the latest research-based AODA treatment approaches for adolescents in the CJ system. Staff were trained at Lincoln Hills in 1997 and Ethan Allen in 1998, resulting in 100 staff being trained and revision of treatment programs at both facilities.

The federal Center for Substance Abuse Treatment funded 85 to 90 percent of the costs of the technical assistance, with the states providing the remainder of the funding.

#### ▪ **Juvenile Court Intake Pilot Projects**

Originally funded under s. 48.547 Wis. Stats., this program developed juvenile court intake procedures that screen, assess, and give new dispositional alternatives for children with needs and problems related to the use of alcohol or controlled substances. The nine county agencies funded under this program were selected after a competitive application process. The projects began in 1989 and have been funded for nine years. Across the nine projects, approximately 2,800 juveniles are screened each year for substance abuse problems. After the screening process, 20 to 30 percent of the juveniles are found to have substance abuse problems. Dispositional alternatives for those juveniles included a substance abuse education program (30 percent), outpatient treatment (50 percent), and other dispositions such as family counseling, mental health treatment, and detention (20 percent). For those juveniles receiving outpatient substance abuse treatment services, 58 percent were considered successful at discharge as defined by a reduction in alcohol or drug use or remaining free of substances altogether. Improvements have also occurred in relationships with parents or guardians, self-esteem, and school adjustment.

- **Prisoner Reintegration (Lincoln Park Community Center)**

The prisoner reintegration program administered by the Lincoln Park Community Center in Milwaukee was authorized in 1991 Act 39 by the Wisconsin Legislature. The intent of the legislation is to help prisoners successfully reintegrate into the community upon release from prison. The Prisoner Reintegration Program (PRP) assists participants prior to release from prison and after release with planning and obtaining housing, employment, education, and treatment in the community.

The PRP uses a peer case management and counseling approach to provide services. PRP has established a cooperative working relationship with the state Department of Correction's Division of Community Corrections, which enhances the monitoring of parolees.

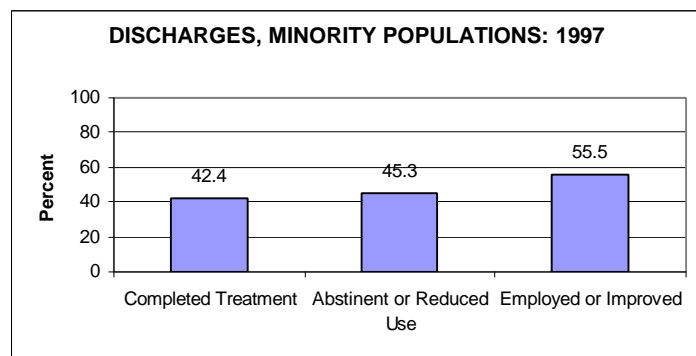
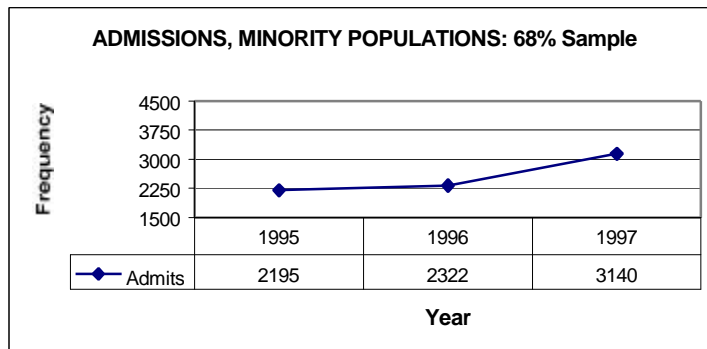
During 1998, PRP interviewed 273 individuals for inclusion in the program. Over 150 clients found employment through PRP. One hundred and twenty-seven clients were provided regular supportive peer counseling in the areas of anger management, criminal thinking, and stress management.

The majority of clients have a history of substance abuse. PRP provides information on substance abuse services to all clients in addition to coordinating Alcoholics Anonymous (AA) and Narcotics Anonymous (NA) meetings at Lincoln Park Community Center for clients.

During 1998, four clients were admitted to AODA inpatient treatment facilities. PRP assisted 19 clients in finding housing and 28 clients in educational assistance. PRP staff monitor and follow clients' recidivism back into the prison system. Data collected since the program's inception has shown a recidivism rate of less than 20 percent back to prison.



# Minority Populations



## ■ In-Home and Community Based Treatment for Minorities

This program funds La Casa de Esperanza, Inc., in Waukesha and the Milwaukee Women's Center in Milwaukee to provide intervention, treatment and family support services to low income Hispanic and African American individuals. During 1998, 197 persons receiving case management and treatment for substance abuse problems benefited by improving family relationships and productivity.

## ■ Consolidated Family Services

In 1992, the Department initiated a consolidated approach to contracting with tribal governments for children and family services, including alcohol and other drug abuse treatment. Under this innovative program, 11 different social service programs were consolidated into a contract on behalf of the state and tribal governments. The Department provides funding for substance abuse services under the consolidated contract, which includes prevention of youth substance abuse, treatment of adult and youth substance abusers, parenting education, and in-home counseling for substance abuse. Each tribe has a family services program leader and BSAS has responsibility for the following four tribes: Lac du Flambeau, Potawatomi, Menominee, and Sokoagon.

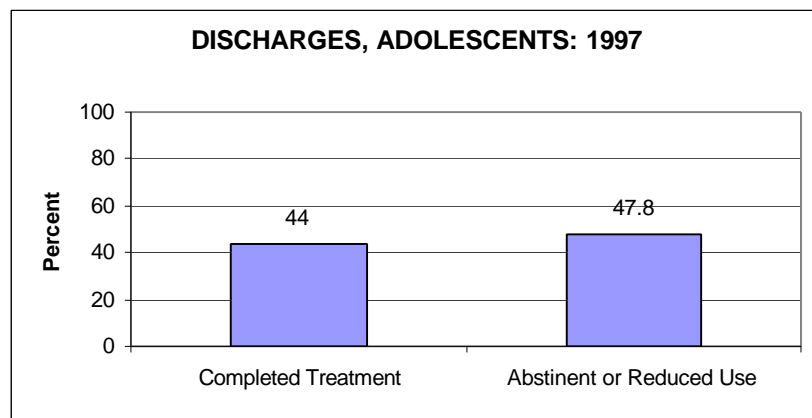
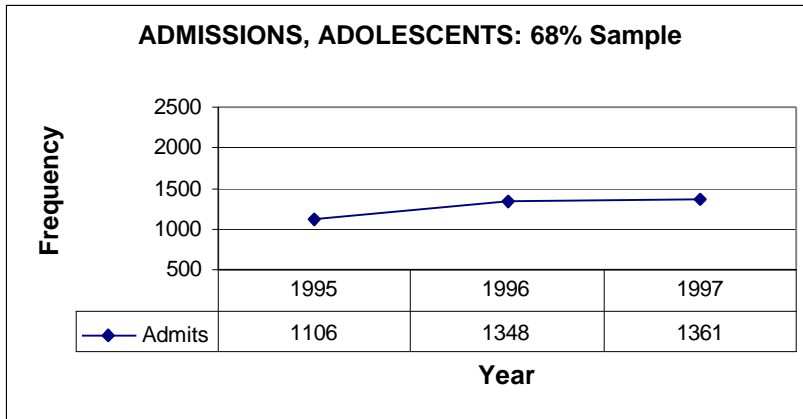
During 1998, 512 Native American adolescents received and benefited from alcohol and drug abuse prevention activities, which included talks and small group discussions, drug-free

recreational activities, and cultural experiences. Fifty-eight parents completed parenting education classes focusing on a variety of topics including substance abuse. Seventy-four children participated in alcohol and drug abuse education activities geared to their age level. Sixty adults and adolescents were admitted for alcohol or other drug abuse treatment. Fiftyfour percent completed treatment successfully.

- **New Beginnings-United Community Center**

In 1989 (Act 122), Chapter 46.48(16), Wis. Stats., established funding for a residential treatment program for Milwaukee Hispanic residents. The United Community Center's Adult Residential Treatment Program is an eight-bed community based residential facility licensed by the state for adult male substance abusers needing 24-hour care. The average length of stay at the facility is 60-90 days. It offers a 24-hour therapeutic milieu with group and individual counseling and education. A family program is also part of the treatment regimen. The program serves 35 clients each year and has a waiting list. Data collected in 1997 demonstrate that 71 percent of the clients complete the program, and at discharge, they are abstinent, employed, have had no contact with the criminal justice system, and are engaged in an aftercare plan.

# Adolescent Populations



## ▪ Residential Substance Abuse Treatment for Adolescents

Senate Bill 31 (1989) created funding for a residential substance abuse treatment center for adolescents in Oneida County. The funds were initially used to establish the Lakeland Adolescent Recovery Center (LARC) in the town of Woodruff. Insufficient funding and referrals resulted in the closing of this facility, however the need for adolescent treatment still exists in the area. The Human Service Center agency of Forest, Oneida and Vilas Counties uses the funding under this program to contract for adolescent treatment for the uninsured at Transitus House, Chippewa Falls; Koinonia, Rhinelander; and Koller Behavioral Health, Minocqua.

## ▪ Inner City Councils

Under the inner city high-risk youth projects, Rock, Racine, Kenosha, and Dane counties received funds for community-based education, prevention and treatment programs. Inner City Councils were established in each of these areas to provide such services as follow:

- AODA education and prevention sessions
- After school/latchkey programs
- Young women's role models program

- Midnight basketball league
- Narcotics Anonymous groups for women
- Motivational counseling
- Case management
- Life skills training
- Information and referral
- Families and Students Together programs
- Academic skills enhancement
- Support groups

All counted, over 2,790 inner city youth received services during 1998, which will, hopefully, lower their risk of becoming involved with alcohol or illicit drugs later in life.

#### ▪ **Career Youth Development (CYD)**

1989 Act 122 (Ch. 46.48(18) created funding for CYD in the city of Milwaukee. The funds are used for a minority youth substance abuse treatment program and a drug prevention program for high school athletes in the Milwaukee public school system. Services are designed to help youth develop a positive self-image while leading them to a drug-free lifestyle.

The specific activities provided by CYD each year include prevention training for 132 adult professionals in the community each year; substance abuse education for 252 youth, intervention services for 168 youth, residential or outpatient treatment for 60 youth, and sports clinics for 180 athletes.

#### ▪ **Synar Tobacco Control Project**

During the summer of 1998, the Bureau of Substance Abuse Services (BSAS) conducted its second statewide retail tobacco "compliance check" survey. This survey is designed to ascertain the prevalence of merchants in Wisconsin who sell tobacco products to minors. The compliance check survey is a federal requirement under section 1926 of the Public Health Service Act, otherwise known as the "Synar Amendment."

<b>Summary of Tobacco Inspection Results by State Geographic Sampling Unit</b>										
<b>(1)</b>		<b>(2)</b> <b>No. of Tobacco Outlets*</b>			<b>(3)</b> <b>No. of Outlets Randomly Inspected in Federal Fiscal Year 1998</b>			<b>(4)</b> <b>No. of Outlets Found in Violation During Random Inspections</b>		
	Geo-graphic Sampling Unit	(a) Over-the-Counter (OTC)	(b) Vending Machines	(c) Total Tobacco Outlets (2a + 2b)	(a) OTC	(b) Vending Machines	(c) Total Tobacco Outlets (3a + 3b)	(a) OTC	(b) Vending Machines	(c) Total Tobacco Outlets (4a + 4b)
No.	Statewide	---	---	15,888	503	72	575	118	42	160
Percent**	---	---	---	---	---	---	---	23.5	58.3	27.8

\* Wisconsin tobacco sales licenses do not specify the type of outlet (i.e., whether the license is for over-the-counter sales or vending machine sales). Therefore, columns 2 (a) and 2 (b) are not completed.

\*\* Percentages apply only to column 4, which details the final inspection failure rate for the survey.

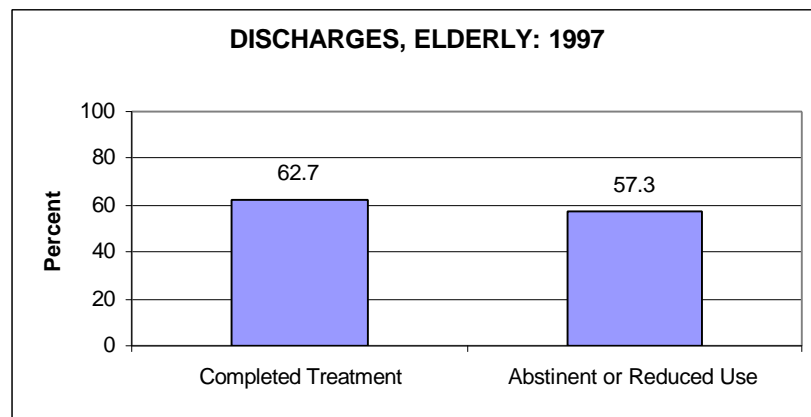
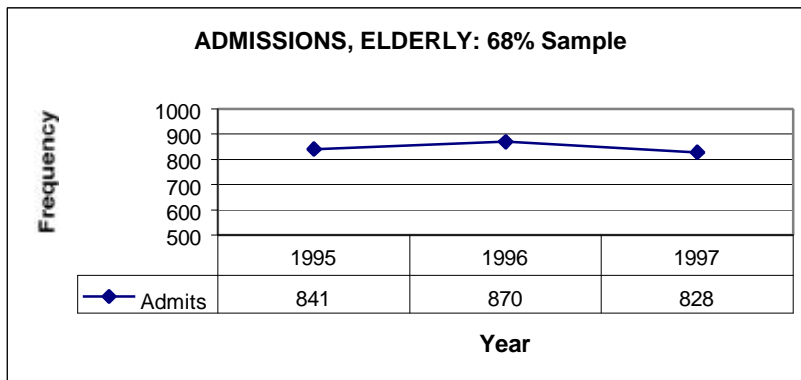
The purpose of the Synar legislation is to require states to monitor illegal sales of tobacco products to underage youth and to demonstrate a measurable reduction in such sales over time. To meet this requirement, states must conduct an annual, scientific compliance survey of randomly selected retail outlets that sell tobacco products.

The table on the previous page illustrates information from the 1998 inspection survey results. There were a total of 575 successful observations. Of the 575 observations, 160 vendors sold to minors on the inspection team for an inspection failure rate of 27.8 percent. Successful purchases at vending machines were higher (58.3 percent) than at over-the-counter sites (23.5 percent).

Inspection teams were asked to record whether a retail outlet had a sign posted indicating that Wisconsin law forbids the sale of tobacco products to minors. Results indicate that only 157 sites, out of 543 reporting, had the appropriate sign posted. This represents only 28.9 percent compliance.

Teams were also asked to indicate whether or not the clerk or salesperson asked for age identification. Only 47.6 percent (240 of 532 reporting) asked the youth to provide photo identification.

# Substance Abuse and the Elderly



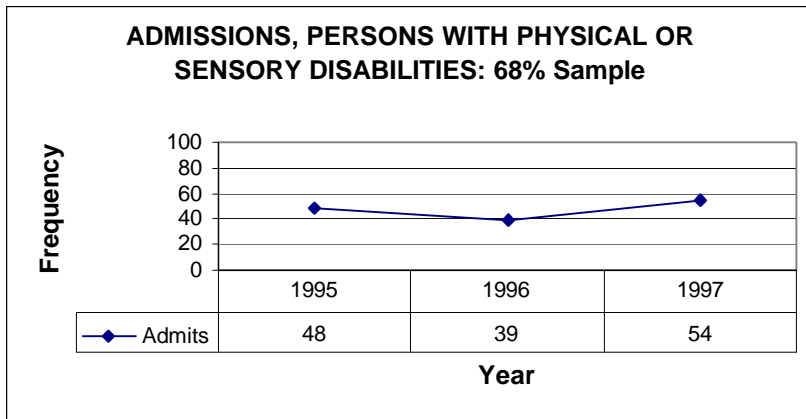
## ▪ Elderly Populations

As people age, their bodies metabolize alcohol at a slower rate, increasing their exposure to alcohol's toxic effects. A recent study by the University of Wisconsin Medical School of elderly patients visiting their family physicians (n=5,065), found that 12 to 15 percent of persons over age 60 drink enough alcohol to create risks to their health. The increased use of medications among the elderly poses additional risks. As a result, the Bureau of Substance Abuse Services has partnered with the Bureau of Community Mental Health to provide funds for the Bay Area Agency on Aging, Green Bay, which, in 1999, will provide a variety of training and education opportunities for providers of substance abuse, mental health and aging services. Included in the \$20,000 grant are identification of training needs around substance abuse, mental health, and aging and identification of resources and expertise available. Training topics include the following:

- Outreach among the elderly
- Screening and assessment of substance abuse among the elderly
- Special treatment needs of the elderly
- Treatment plans for the elderly
- Case management and ancillary service needs for the elderly
- Collaborating with primary health care providers
- Medications and substance abuse

The goal of the training is to increase access to treatment and improve the quality of care for the elderly, thereby increasing the quality of life for persons in their senior years.

# Physical and Sensory Disabilities



Note: There is no chart on discharge information because it is too small a sample to include.

- **Wisconsin Alcohol and Other Drug Abuse Treatment Program for Deaf and Hard of Hearing Individuals**

The Deaf and Hard of Hearing Program is a program of the Koinonia Residential AODA Treatment Program, Rhinelander, and receives \$125,000 annually from the Department of Health and Family Services to subsidize this specialized program, which offers a continuum of substance abuse services that is language and culturally appropriate.

The program served a total of 39 clients in 1998 (23 deaf and 16 hard of hearing), whose average age is 32 years old. The average length of stay for the 39 clients was 60 days. Of the 39, 18 were discharged "with staff approval," 9 left "at staff request," 1 was referred, and 11 left "against staff advice."

Twenty-seven former clients were contacted directly in the fourth quarter of 1998 to follow up on their progress. Program staff continue to have frequent contact via phone calls, letters, and visits with former clients who are maintaining abstinence. A former deaf client returned to receive his Program medallion. He spoke on his experiences as a successful participant. Outreach to Native American communities was accomplished through a Native American counselor trainee doing part of his internship at Koinonia, thereby giving him the opportunity to see deaf and hard of hearing AODA clients.

Other outreach efforts involved distribution of the program's newsletter, an advertisement placed in the Wisconsin Telecommunications, Inc. directory, and displays at workshops and various conferences.

- **Wisconsin Alcohol, Drug & Disability Association**

WADDA is a nonprofit organization committed to creating public awareness of issues related to alcoholism, drug addiction, and substance abuse faced by persons with disabilities, and to

enhance access to services, information, education, and prevention through a collaborative effort.

The Bureau of Substance Abuse Services supported approximately 40 individuals through scholarships to attend the 4<sup>th</sup> Wisconsin Alcohol, Drug & Disability Conference in August 1998. Nationally known speakers discussed such topics as misunderstanding unpredictable behavior, deficits in cognitive functioning, and language barriers that often interfere with or confuse the traditional substance abuse treatment process. Seven “Tilting at Windmills” sessions were supported in 1997, and several more are planned in 1999. The workshops are designed to assist the substance abuse treatment professional in the identification of attitudes, myths, stereotypes, and barriers that prevent or impede persons with disabilities from seeking treatment. The training helps the clinician look beyond an individual’s disability and consider issues on a case-by-case basis.



# Counselor Development and Competency

## ▪ Wisconsin Certification Board, Inc.

The Bureau of Substance Abuse Services administers a \$121,500 contract to support the functions of the Wisconsin Certification Board (WCB). One of the many goals of WCB is to provide ongoing certification and a recertification process for Wisconsin's alcohol and drug counselors. The WCB also participates in the International Certification Reciprocity Consortium/ Alcohol and Other Drug Abuse, Inc. (ICRC), a network of states to screen

Category*	Number of Certifications
PLAN	55
RADC I	471
CADC II	65
CADC III	1,451
CCS I	13
CCS II	130

other state certification standards and negotiate reciprocity agreements. The WCB receives complaints, investigates and sanctions persons who are under WCB jurisdiction and are alleged to

Ethnicity	Number of Certifications	Percent of Certifications
African American	195	9.4%
Asian American	8	.4%
Caucasian	1,759	85.2%
Hispanic/Latino	50	2.4%
Native American	48	2.3%

have violated the Counselor, Clinical Supervisor, and Prevention Code of Conduct. The WCB also implemented the new Certification of Clinical Supervisors (CCS) during 1998. Currently, CCS is a voluntary certification recognizing individuals who meet the standards for Certified Clinical Supervisor. The WCB conducted statewide training

opportunities for individuals to participate in a Clinical Supervisor training with the CCS examination offered at the end of the training. The charts in this section identify some notable counselor certification statistics.

\* RADC = Registered Alcohol/Drug Counselors; CADC = Certified Alcohol/Drug Counselors; CCS = Certification of Clinical Supervisors

## ▪ Midwest Institute

The Midwest Institute for substance abuse professional education is held each year in Madison, Wisconsin, during the summer (July) and in Lansing, Michigan, in the winter (January). 1998 marked the 44th annual summer and the 24th annual winter institute. The Institute is sponsored by the Wisconsin Department of Health and Family Services and the Michigan Department of Community Health and in cooperation with training providers in Illinois, Indiana, and Ohio. The focus of the Institute is to provide educational programs offering knowledge and skill development to professionals working in the field of substance abuse. The curriculum is comprised of four-day workshops that cover Fundamentals of Substance Abuse, Counseling Theories/Techniques, Counseling the Criminal Justice Substance Abuse Client, Ethics and Confidentiality, Pharmacology/Psychopharmacology and also two-day workshops offering concentrated studies on current issues.

### **Winter & Summer Institutes Participation**

<b>Number of Participants</b>		
<b>Year</b>	<b>Winter</b>	<b>Summer</b>
1998	203	189
1997	139	151
1996	124	148
1995	158	120
1994	178	91

A Certificate of Achievement, which is applicable for CAC certification, is provided to participants. The Institute also offers an academic credit option. Attendance is taken at each session. Participants in full attendance receive 28 contact hours for four-day workshops and 12 hours for two-day workshops, applicable toward Certified Addictions Counselor (CAC) certification. Participants with less than full attendance receive a certificate for the number of hours of actual attendance. A letter of participation is awarded after the last session of the workshop with certificates mailed following the Institute.

#### ▪ **Minority Training Program**

This statewide project offers training in the core areas of counseling and provides career consultation to minorities aspiring to achieve counselor certification. In addition to the Project Director, the project is composed of a career consultant coordinator, an MTP Support Center Director, and several career consultants. The number of active participants in MTP has been between 200 and 300. Thirty-three MTP participants were certified in calendar year 1998. Currently, there are between 1400 and 1500 Certified Alcohol/Drug Counselors (CADCs) statewide of which 191 are certified minority counselors. There also are 67 Registered Alcohol/Drug Counselors (RADCs) statewide who are MTP participants working toward becoming CADCs.

# **Compulsive Gambling Awareness Campaign**

In 1998, the Department of Health and Family Services was allocated \$100,000 of General Purpose Revenue (GPR) dollars to "provide grants to one or more individuals or organizations in the private sector to conduct compulsive gambling awareness campaigns." The Bureau of Substance Abuse Services has oversight for this program due to gambling's addictive characteristics. Many state-certified substance abuse programs also have gambling components.

The Bureau of Substance Abuse Services (BSAS) contracted with the Wisconsin Council on Problem Gambling (WCPG) to develop a statewide awareness campaign addressing the issue of compulsive gambling. The WCPG is one of 33 state affiliate councils of the National Council on Problem Gambling. Their primary mission is to educate and promote public understanding of problem gambling and the disorder of compulsive gambling. The WCPG is a non-profit organization located in Green Bay.

Among the initiatives for the campaign are expanded visibility for the Council's 24-hour helpline which provides referral services for callers, a public relations/media campaign, piloting and implementation of a high school gambling prevention curriculum, training for human service professionals, and the development and implementation of a statewide information and networking conference. The campaign is directed at all gamblers and those affected by problem gambling. The elderly and underage minors have been identified as high-risk populations.

# Administration

- **Substance Abuse Services Standards**

The Substance Abuse Services Standards were submitted to the Secretary of the Department of Health and Family Services in late 1998. Revisions to the Standards included Uniform Placement Criteria, the addition of two new levels of care, expanded prevention and methadone standards and clinical supervision. The Standards were sent to Legislative Council for approval to proceed with public hearings. Public hearings are scheduled for 1999.

- **Wisconsin Works (W-2) Substance Abuse Screening Instrument**

In 1998, the Department of Workforce Development and the Department of Health and Family Services furthered the goal of W-2 and AODA Inter-systems collaboration of training for W-2 Financial and Employment Planners (FEPs) on AODA and in the implementation of a W-2/AODA Screening instrument for use by FEPs and Resource Specialists who have direct contact with W-2 participants. Seven two-day training sessions were held across the state in 1998 with a total of 397 attendees completing training. Three women's treatment provider agencies in Milwaukee; Meta House, Milwaukee Women's Center, and Safe Group Services provided considerable input. The W-2 AODA Screening Instruments were developed and included in the W-2 Resource Guide and in the AODA Training Manual. In December of 1998, an Inter-system Technical Review was conducted in Milwaukee County, which involved approximately 45 representatives from W-2, AODA, Child Welfare, Probation and Parole, and Managed Care entities in the county.

- **Center for Substance Abuse Treatment (CSAT) Reviews**

In December of 1998, the Bureau of Substance Abuse Services underwent a State Alcohol and Other Drug Technical Review. The review was done by Johnson, Bassin & Shaw, Inc. (JBS), an agency contracted by the federal Center for Substance Abuse Treatment (CSAT). These technical reviews are a fundamental part of CSAT's State Systems Development Program, which is an effort to work with states to successfully meet the challenges facing the public SA treatment systems. The review was based on criteria from CSAT to measure compliance with the Substance Abuse Prevention and Treatment Block Grant, which provides approximately \$24 million each year to Wisconsin for substance abuse services. The Bureau was found compliant in all six core areas prescribed by CSAT. In addition, a second review took place in Milwaukee to assess efforts to develop formal linkages between Substance Abuse, Child Protective, and Welfare to Work Services.

- **Data Collection and Evaluation Initiatives**

The Drug and Alcohol Services Information System (DASIS), a federal SAMHSA grant that collects treatment client data, has increased its coverage to 68 percent of publicly-supported treatment clients across the state. The system is housed in the Division of Supportive Living's Human Services Reporting System and collects admission, demographic, services and discharge data on clients whose treatment is supported with public funds.

- **County Quality Improvement Reviews**

Five county provider quality improvement reviews were completed in 1998, Door, Green Lake, Iron, Racine and Wood. Review teams consisted of BSAS staff, representative of the Office of Strategic Finance's Regional Office, and a peer reviewer (a professional from a state-certified AODA program not in the county being reviewed). These reviews of systems and providers have benefits both in identifying technical assistance needs and showcasing counties with exemplary delivery systems. BSAS has received letters from the counties involved that illustrate the positive response to this collegial process of assessing service delivery.

- **State Demand and Needs Assessment Contract**

Funded in 1995 for four years by the federal Substance Abuse and Mental Health Services Administration (SAMHSA), the State Treatment Needs Assessment Program published four of its studies in 1998.

*The Composite Indicators Study* found 16 county-level variables such as traffic crashes, alcohol-related deaths, and liquor licenses that correlated with treatment need. The study will be used to improve the distribution of new substance abuse funds.

*The Treatment Capacity Study* provided valuable information on treatment utilization, waiting lists, and costs that will be used in the development of the managed care pilots.

*The Substance Abuse and Need for Treatment Among Arrestees Study* found that 39 percent of arrestees in Wisconsin tested positive for an illicit substance and 32 percent of arrestees have an alcohol or other drug abuse disorder requiring treatment.

*The Substance Abuse and Treatment Needs Among Pregnant Women Study* demonstrated that Wisconsin women exceed the national average in the proportion who drink during pregnancy (32 percent vs. 18 percent). In addition 11 percent had a current alcohol or other drug disorder requiring treatment.

The fifth study, *Checking the Alcohol and Other Drug Health of Wisconsin Adults and Adolescents*, is scheduled for publication in 1999.

- **Wisconsin Uniform Placement Criteria for Adult Substance Abuse Patients**

Voluntary use of Wisconsin Uniform Placement Criteria (WI-UPC) has increased throughout the state's substance abuse treatment programs during 1998. An additional 150 individuals have participated in BSAS-sponsored training events during the past year, which brings the total trained to approximately 1,600 people. The required use of WI-UPC, or a like instrument, to establish a placement recommendation has been inserted into the draft Wisconsin Administrative Code for Substance Abuse Services (HFS 75). The Center for Substance Abuse Treatment (CSAT) has provided approximately \$18,000 in a technical assistance grant to be used for the production of a two-tape training video series. Approximately 100 copies of the video series will be produced and made available to each of the county human service agencies. An additional ten training events are scheduled in 1999.

- **Surplus Personal Computer Redistribution**

In accordance with Department of Health and Family Services policy, the Bureau of Substance Abuse Services has taken the lead role in the redistribution of surplus personal computing equipment for the Division of Supportive Living. In 1998, 176 computers were relocated to community and tribal agencies with which the Department contracts. Since the effort began in 1993, over 400 PCs have been distributed; many of these agencies received their first computer through this program. The effort has saved Department funds and has increased the efficiency of operations among contract agencies.

- **Bureau of Substance Abuse Web Site**

The Bureau's web site was tripled in size and scope in 1998. Along with a redesigned home page, an ***Education*** category was added for training and conferences. This site invites agencies delivering training on substance abuse issues or sponsoring conferences to have their event put on the Internet. In addition, a "Women's Initiatives" section was added to the ***Program*** category and includes information about the Bureau's project, Wisconsin Women's Empowerment Network (WWEN) and development of resources and services for women across the state. Another site is ***Other Links*** that has links to national and state web sites that pertain to substance abuse, gambling, and tobacco.

- **1998 Statewide Substance Abuse Information Meeting**

The fourth annual Bureau of Substance Abuse Statewide Meeting, *Substance Abuse Services As We Approach the 21<sup>st</sup> Century*, " was held in LaCrosse on November 16, 17, 1998. Workshops included information on Managed Care, State-County-Provider Quality Improvement Review, current trends in youth substance abuse, changing dynamics with elderly and substance abuse, Fetal Alcohol Syndrome and Effects, caregiver background checks, Substance Abuse Services Standards, substance abuse and co-existing disabilities and substance abuse treatment and women. This annual information-sharing meeting has grown from 200 to 350 attendees. As a pre-meeting, the State Council on Alcohol and Other Drug Abuse held a public forum to receive comment and concerns from the field.

# Acknowledgements

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# Future Directions - 1999 & Beyond

- The Bureau of Substance Abuse Services, Bureau of Community Mental Health, and the Division of Health Care Financing continue to work with counties and other interested parties to implement Mental Health/AODA Managed Care demonstrations as recommended by the Governor's "Blue Ribbon Commission on Mental Health" report.
- With continuing funding from a federal Substance Abuse and Mental Health Services Administration needs assessment grant, the Bureau of Substance Abuse Services plans to increase its outcome study population to a statewide cross-section of 15 treatment centers. The study will provide valuable information on the outcomes of publicly-supported treatment and will also serve as a self-evaluation mechanism for individual centers.
- The DASIS client data system will expand its coverage from 68 to 100 percent of publicly-supported treatment clients across the state.
- The Substance Abuse Service Standards are scheduled for public hearings in May and will be implemented later in 1999.
- The Bureau of Substance Abuse Services is applying to the federal Food and Drug Administration to enter into a contract to carry out random, unannounced youth tobacco buy attempts at stores and other retail outlets across the state. Retailers who sell to minors will be sanctioned by FDA.
- A biennial budget initiative to develop women's substance abuse intervention and treatment services in rural and urban areas will help to meet a critical unmet service need.
- The Bureau of Substance Abuse Services has initiated a cooperative arrangement with the Division of Public Health to address Fetal Alcohol Syndrome and Fetal Alcohol Effects (FAS/FAE) education needs, particularly for the training of primary physicians to screen pregnant and postpartum women for substance abuse.
- County quality improvement reviews will continue with at least six counties scheduled for 1999. The focus will be on improving coordination among programs and the clinical aspects of treatment.
- The Bureau of Substance Abuse Services will continue its mission to enlighten Wisconsin communities and policy and lawmakers that "Treatment Works" by publishing client and system outcomes and highlighting programs that work.
- The Bureau will continue development of statewide interactive communication through the Internet, electronic mail, education and training networks (ETN) and video conferencing to make the opportunity available to receive the most recent news, training opportunities and treatment information.
- The State Council on Alcohol and Other Drug Abuse will:
  - Work toward increasing the amount of federal funding awarded to Wisconsin departments and agencies.
  - Host a discussion of pain management and associated social/policy issues and recommend future directions.
  - Review the biennial budget and issue recommendations to the Legislature and Governor.
  - Monitor state and federal legislation addressing substance abuse.
  - Work collaboratively with the Legislature by, upon request, providing staff analysis of proposed legislation.
  - Recognize model prevention programs in Wisconsin.